

Schedule 9 A					
Cash Fund Status for: Trauma System Cash Fund 12A					
C.R.S. Citation: C.R.S. 25-3.5-603					
	Actual 05-06	Actual 06-07	Estimate 07-08	Request 08-09	Projected 09-10
Beginning Balance	\$69,774	\$18,184	\$127,166	\$119,613	\$111,762
Exempt Revenue	\$2,464	\$47,734	\$5,000	\$5,000	\$2,500
Non-Exempt Revenue	\$291,367	\$330,146	\$291,394	\$312,197	\$292,907
Total Expenditures	\$345,421	\$268,898	\$303,947	\$325,048	\$390,380
Ending Balance	\$18,184	\$127,166	\$119,613	\$111,762	\$16,789
Reserves Increase/Decrease	-\$51,590	\$108,982	-\$7,553	-\$7,851	-\$94,973
Fee Levels					
	Actual 05-06	Actual 06-07	Estimate 07-08	Request 08-09	Projected 09-10
1. Level 1 Trauma Center	\$26,600	\$26,600	\$26,600	\$26,600	\$26,600
2. Level II Trauma Center	\$25,900	\$25,900	\$25,900	\$25,900	\$25,900
3. Level III Trauma Center	\$16,600	\$16,600	\$16,600	\$16,600	\$16,600
4. Level IV Trauma Center	\$6,800	\$6,800	\$6,800	\$6,800	\$6,800
5. Level V Trauma Center	\$6,800	\$6,800	\$6,800	\$6,800	\$6,800
6. Regional Pediatric Trauma Center	\$26,600	\$26,600	\$26,600	\$26,600	\$26,600
NOTE: ALL FEES ARE ASSESSED EVERY THREE YEARS					
Cash Fund Reserve Balance					
	Actual 05-06	Actual 06-07	Estimate 07-08	Request 08-09	Projected 09-10
Uncommitted Fee Reserve Balance (total reserve balance minus exempt assets and previously appropriated funds; calculated based on % of revenue from fees)	\$18,031	\$111,102	\$117,595	\$110,000	\$16,647
Target/Alternative Fee Reserve Balance (amount set in statute or 16.5% of total expenses)	\$56,994	\$44,368	\$50,151	\$53,633	\$64,413
Excess Uncommitted Fee Reserve Balance	(\$38,963)	\$66,734	\$67,444	\$56,367	(\$47,766)
Statutory Deadline for Complying with the Target/Alternative Reserve Balance			June 30, 2003		

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Cash Fund Narrative Information					
Purpose/Background of Fund	The Trauma System Cash Fund was established by the Trauma Care System Act. Through this fund, the CDPHE receives trauma center designation fees.				
Fee Sources	Fees paid by health care facilities that apply to be designated as a trauma center.				
Non-Fee Sources	Statutorily authorized interest earnings on reserve balance.				
Long Bill Groups Supported by Fund	Health Facilities Division, Emergency Medical Services, central pots lines				
Statutory or Other restriction on Use of Fund	Must be used for direct and indirect costs of designating trauma facilities.				
Revenue Drivers	Number of health care facilities that apply for to be designated as a Trauma Center				
Expenditure Drivers	Number of applicant health care facilities for which an evaluation survey and/or re-visit survey must be conducted.				
Assessment of Potential for Compliance	Good The fund was in compliance on June 30, 2003 and is expected to remain in compliance				
Action	<input type="checkbox"/> Already in Compliance <input type="checkbox"/> Statute Change ¹ <input type="checkbox"/> Planned Fee Reduction ¹ <input type="checkbox"/> Planned One-time Expenditure(s) ¹ <input checked="" type="checkbox"/> Planned Ongoing Expenditure(s) ¹ <input type="checkbox"/> Waiver ²				
1. If plan is needed to meet compliance deadline, attach Form 9.B.					
2. If pursuing a waiver, attach Form 9.C.					
Cash Fund Expenditure Line Item Detail and Change Requests					
	Actual 05-06	Actual 06-07	Estimate 07-08	Request 08-09	Projected 09-10
HFD					
Trauma Fac Desgn - P/S	\$295,749	\$230,145	\$245,980	\$264,600	\$322,581
Trauma Fac Desgn - Op Exp	\$17,586	\$15,915	\$15,447	\$16,960	\$22,230
Indirect Cost Assessment	\$32,086	\$22,838	\$32,770	\$33,738	\$35,819
HFD Total	\$345,421	\$268,898	\$294,197	\$315,298	\$380,630
TOTAL	\$345,421	\$268,898	\$294,197	\$315,298	\$380,630

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Assumptions: Request & Projection Years:				
PLEASE NOTE: THIS SCHEDULE REFLECTS PROJECTED ACTUAL REVENUES AND EXPENDITURES AND DOES NOT MATCH THE SCHEDULE #3. THE CAUSES FOR THE DIFFERENCES ARE REFLECTED BELOW:				
Actual personal services expenditures are based on a three-year cyclical facility review schedule. The program utilizes purchased personal services (medical trauma specialists) to perform on-site reviews of applicant health care facilities.				
The workload for on-site reviews is not distributed evenly across the three-year cycle. In the years when more facilities are re-designated, more purchased personal services expenditures will be necessary, causing annual expenditure levels to vary.				
Fees are paid for a three year designation period. At the request of smaller trauma centers, facilities have been given the option of paying their fee in three portions, spread throughout their three year designation period.				
However, some facilities have continued to pay their fee with a single payment or two payments.				
		Estimated Allocated POTS		
		Estimate 06-07	Request 07-08	Projected 08-09
		9,750	9,750	9,750

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